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Powerful techniques for facial symmetry, hair regrowth and more

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Current Feedback (updated October 2013)

Of the few dozen people I've known that tackled the self-treatment process, 32 people reported excellent progress (improved facial symmetry/cranial structure; better posture; fewer symptoms like headaches; breathing easier etc). 9 people seemed disappointment at the rate of improvement despite improvements in facial symmetry, etc. 5 people observed no changes and felt like they were going nowhere. 2 people reported decreased facial symmetry and both were patients of Dr. Howell. They needed treatments from an NCR practitioner to regain the symmetry they had lost. Many of the negative or zero-results people read an earlier version of my article - since controlling for a few mistakes people often make and adding this information to the article, nobody has had negative/bad results yet.

A year ago I posted on a forum that I was attempting this and about 6 months later I received an email from someone who had also attempted it on his own without a clue about what he was doing. He complained that the balloon was gagging him, so I suggested he try a smaller finger cot. He replied, "Finger cot? I'm using the smallest condom I could find." I'll never get the image of this guy inflating a condom in his head out of my head.

The point is that people do all kinds of crazy things and nobody is watching them. This might be one of the reasons for disparity in results. There are lots of variables that determine the rate of improvement. Even if you were to follow my protocol there's no way to guarantee results. There are risks with everything and obviously this is no exception.

In fact there are three major risks with this therapy: bone fracture (if you're using a LOT of pressure, way more than you'd probably ever use on yourself), inhaling a balloon (if you don't apply common sense and read this article), or regressing in your structure (i.e. becoming less symmetrical, having more structural symptoms, etc). Bone fracture and inhaling a balloon are easily preventable, 100% avoidable risks. Regression is mostly preventable too.

People I've met who are most successful at self-treatment seem to have a lot in common. All of them exercise, eat well, and

take care of themselves. They're dedicated, intuitive and attentive - meaning they pay a lot of attention to their body, track improvements, and follow their body in doing what feels right. Strangely, the most successful people have all been male and the least successful/people who have gotten negative results were all female. I've been trying to figure out if this gender result was all a coincidence, then I realized the females were overly cautious and using very little force in the inflations. I want everyone to know that NCR doctors use a lot of force (really, a lot), and they build the force up in the nasal passage until the balloon essentially explodes into the upper throat/sphenoid. I don't recommend doing it this way at all. I've never needed to, and it's always best to use the least amount of force possible... but the goal is to feel expansion throughout your face. Usually after the 3rd inflation or so you'll feel it in one side of your face, maybe one ear, then in the next inflation or two you'll feel it in the other side of your face. Once you get it in both sides, stop. Or if you've already inflated 5 times, stop (safety precaution). Once you get the hang of things you can do it your own way, but it helps in the beginning to know what to feel for [see below for more detail].

To summarize:

Use enough force when squeezing the bulb to feel expansion throughout one side of your face and into the other side. Once you feel expansion throughout your whole face, stop inflating. If you've already inflated 5 times or more than 20 seconds and have felt no expansion, stop and move to a different nasal passage.

Device Construction

Here is the equipment I use:

- **Sphygmomanometer bulb with release valve**
- **Rite-Aid finger cots (assorted sizes)**
- **Dental floss (waxed)**
- **Q-tip with ball-end removed**
- **99% aloe vera gel (or water based lubricant. These days I use plain water as lubricant)**

I got the bulb on Amazon and everything else at a Rite Aid, excluding the aloe vera gel which I found at Super Supplements.



This is what typical cranial-restructuring device equipment looks like pre-construction



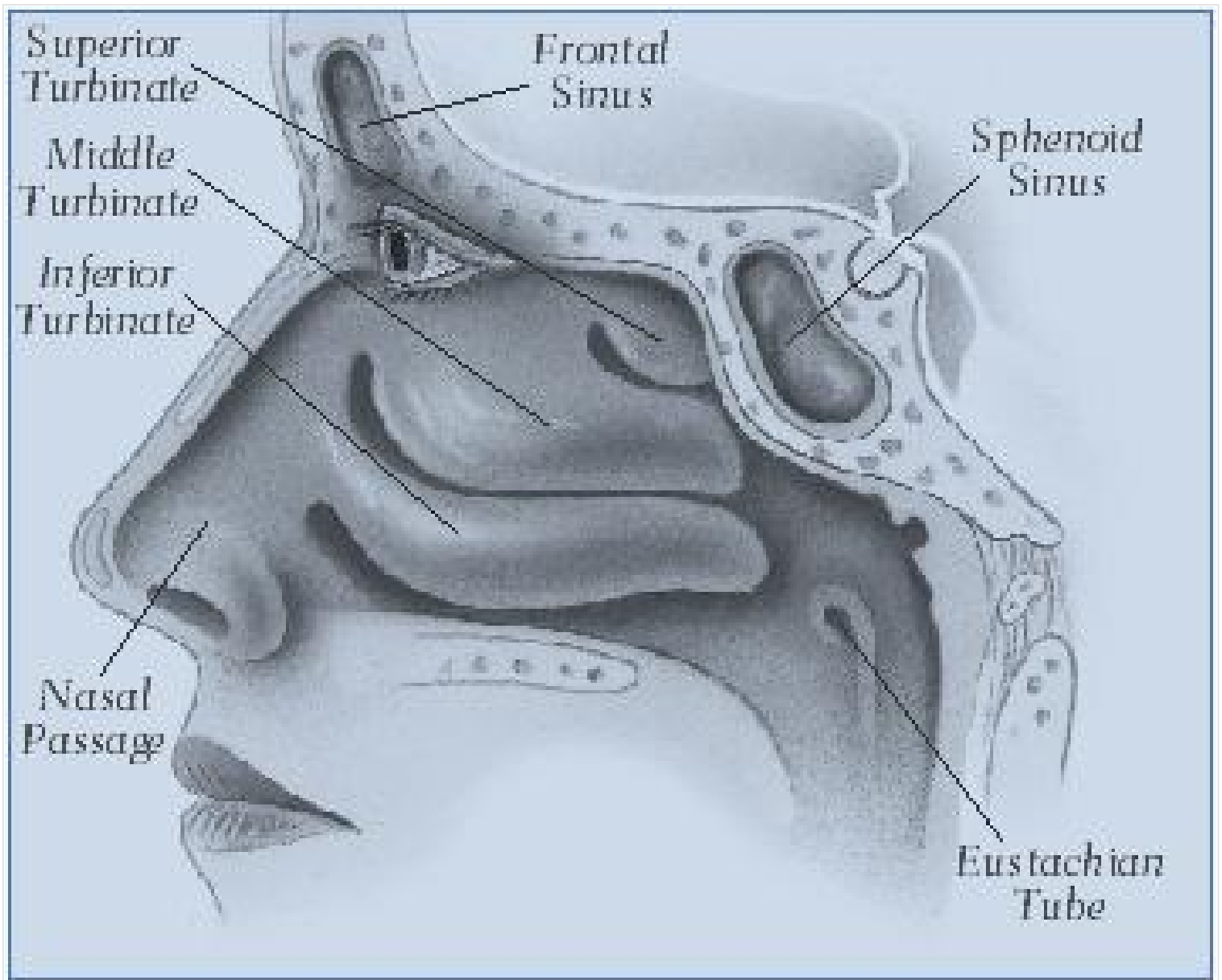
Fully Constructed (dental floss wrapped 20-30x around finger cot. Toothpick/Q-tip with snipped ends)

Any danger of inhaling the balloon can be minimized by affixing the balloon (finger cot) *very* tightly with about 20 or 30 rotations of dental floss. Tugging on the cot to make sure it won't come off is important too. During treatment, I always hold my breath as it further minimizes any chance of inhaling the finger cot balloon (will get to this later).

Practitioners replace the balloons after every treatment, but I find it more convenient to replace them every 3-4 treatments. Doing this more than 100 times, I have only popped a balloon twice and it popped in both cases after using the same balloon for 6 or 7 treatments. It's not terribly painful or dangerous when it pops, it's just not a pleasant experience.

Locating the Sphenoid Bone

I was actually confused about how to treat myself for the first few months. Sadly, it took me a long time to realize that I was inflating the balloon between the nasal turbinates rather than the open space behind them.



Notice in the illustration above the three "holes" between the turbinates. These are the nasal passages. There are three passages in each nostril. The goal is to insert the balloon through the passage so that most of the balloon is resting just behind the turbinate and into the upper throat (near the sphenoid bone, that white bone surrounding the sphenoid sinus in the above illustration).

The best way to get the balloon through the nasal passage is to use the blunt end of a toothpick and a lubricated balloon (finger cot). To reach the top passage, insert the balloon while pushing it up against the top wall of the nose. To reach the bottom passage, insert the balloon while pushing it against the bottom wall of the nose. To get the balloon resting behind a nasal passage and into the throat, squeeze the bulb slowly, gently, and fully while pushing and making slight twists. This will ensure the balloon is straightened and in place. Once it's behind a nasal passage and in the throat you will feel it reach "open air." If the finger cot balloon is too large, it can possibly come down into the throat and gag you when inflated. If it's too small you won't be able to get it all the way through the nasal passage.

Inflating the Balloon

I've experimented with a lot of different inflation techniques. The NCR specialists use an "explosive" method, stacking 1-3 finger cots on top of each other and inflating with a LOT of force (multiple pounds of pressure) for about 3-6 seconds in the nasal passage, then the balloon essentially explodes into the upper throat area/sphenoid. This isn't the safest or most pleasant method. Bone fracture is only truly possible through this method because the turbinates are under intense pressure

for a brief period of time. Unfortunately people are usually locked up at first and do require more pressure to successfully nudge the sphenoid (to move it less than 1mm).

This is what I do: stand up in front of a mirror, making full pumps (squeezing out all the air) in succession, 3-4 times, pump in rapid succession. Never pump more than 5 times in one nasal passage, especially if you get no movement/expansion/release. During inflation, always hold the breath to ensure the balloon won't be inhaled. If there's a sudden pressure differential (release of pressure in the throat) and a feeling of movement/expansion through one side of the face then the next, immediately deflate the balloon and withdraw it from the nasal passage. Usually I'll feel the expansion through one side of my face after 1-3 inflations, then on the 3rd-4th inflation I'll feel it in the other side of my face->through to the ear. **When the expansion has gone through both sides of the face, stop.** Some people think they're supposed to hear a cracking sound or feel something phenomenal but this probably won't happen all at once unless a lot of force is used (not recommended). I've gotten great results being somewhat gentle and patient.

The NCR specialists use a ton of force and treat only four times a month in order to maximize each treatment. I've gotten better results in one month, treating myself 12-15 times gently and without all the massage, than I ever received in 4 powerful NCR treatments. The only difference is you notice NCR more because it's greater change/greater release in a shorter time frame, but for some people like myself it's slower than self-treatment in the long run considering the 1 session (4 day) per month limit on NCR.

Determining the Best Placement Strategy

BNS Method (TL - TR - ML - MR - BL - BR)

There are a few different options for determining balloon placement. Bilateral Nasal Specific (BNS) involves inflating the balloon in the top left, top right, middle left, middle right, then bottom left and bottom right passages all in one day. I tried this for a few weeks but didn't get such great results from it. Dr. Howell believes asymmetrical treatments are more effective than BNS and I agree.

Asymmetrical Method (TL - ML - BL or TR - MR - BR)

Asymmetrical = top left, middle left, bottom left the first day... top right, middle right, bottom right the second day, etc. Some people also study their face closely, and treat asymmetrically on the weakest side. So for example if the left side is more narrow than the right side, they would treat the left side until it's even with the right. This actually does work although the NCR doctors are told it's unreliable (probably having to do with promoting and controlling the techniques involved in NCR).

Dr. Howell invented proprioceptive testing, which supposedly allows the NCR practitioner to determine the "most unstable" part of the physical structure to correct, corresponding to an area of the sphenoid. I still haven't determined whether this is true or not. It seems there are more effective placements and less effective placements, but it's not all or nothing as NCR practitioners claim. This method is not available to me or anyone else, as it takes a while to learn. This is primarily what sets NCR apart from BNS and other balloon based cranial therapies.

Intuitive Placement Method

The method that works the best for the most people is intuitive placement. If one side of the face is particularly asymmetrical or narrow, you may want to treat on that side (because you'll get greater expansion on the side of the face that you're treating). You can use these kinds of assessments to decide the best place for the balloon, and oftentimes this means going in the same nasal passage over and over. There's nothing wrong with that, but you may want to experiment and try other passages just to get a better sense over time for the best placement. In either case if you're treating the left side or right side, or upper passage or lower passage, bones throughout the face and head will change position (especially in the beginning).

Muscle Testing Method

Another technique uses "muscle testing" to ask the body (subconscious) answers to questions it knows, but the conscious mind does not. Muscle testing helps you determine what you believe to be the case. So for example if you believe that your top left passage is the area that would benefit most, you can use muscle testing to recognize what you already believe to be the case. Intuitively people seem to know what area most needs treatment, especially after they've done this for a couple months. For the time being, don't get too caught up and stressed with "proper" placement. Focus more on getting expansion during the inflation process, from ear to ear, and seeing results.



Here are the questions I use to determine *where* the ideal treatment location is on any given day. It changes day per day, although I've noticed that my body seems to require one side more than the other.

Does my left side require treatment?

Or you can get more specific: **Would it benefit me to treat my [left] nasal passages today?**

Does my right side require treatment?

Does my top left nasal passage require treatment?

Or: **Would it benefit me to treat my [top left] nasal passage today?**

Does my middle left nasal passage require treatment?

Does my bottom left nasal passage require treatment?

Does my top right nasal passage require treatment?

Does my top middle nasal passage require treatment?

Does my bottom right nasal passage require treatment?

Again, this is what I do and it works great for me. Stick with your intuition or an asymmetrical protocol if this doesn't make sense to you.

How Endonasal Inflations Work

We all want to know the answer to this question: how does inflating a balloon into the sphenoid bone improve facial symmetry/structure and benefit the body in so many ways?

Here's the best way to understand it: the connective tissues (dura mater) hold the skull in place, and as skull is impacted in minor ways over time, these impacts "scrunch" the connective tissue - pulling the skullplates with it. Over the course of various traumas the connective tissue becomes more and more scrunched and tense. Obviously there needs to be some kind of intervention to loosen the tissue and let it retake its original shape, but how? By nudging the sphenoid, apparently. When the sphenoid moves (less than .5mm), 20 other bones are "pushed" or "pulled" about ever so slightly. As the balloon is inflated, the sphenoid resists, tension builds in the skull, then comes the release. If you were to imagine it in numbers, let's say your connective tissue tension level starts at 75. With each inflation of the balloon against the sphenoid, tension moves up to 76, 77, 78 as the sphenoid resists, then suddenly gives slightly and releases back down to 73. This is why when people don't use enough force and don't get a proper amount of release, but instead just built more tension in the connective tissue, they get bad results or negative results. The wonderful thing about all of this is that tension in the connective tissue correlates directly with bone symmetry, cerebro-spinal fluid flow and other important processes. As the connective tissues drop tension, the face becomes more beautiful and natural - the way it would be without nutritional, emotional, genetic and physical trauma.

I can't say my explanation would be posted in any scientific journals or score highly for anatomical accuracy, but it gets the point across pretty well.

When and How Often

I treat between 2pm and 8pm assuming a normal day/night schedule, and no later than 8pm (earlier than 2pm is okay). Treating too early in the morning can be risky - as you get tired, whereas too late in the day might make you too energized to sleep. Also, doctors advise 20 minutes of walking per day at minimum (POST treatment) to facilitate and stimulate the unwinding process. I agree.

As for the question of "how often?" Dr. Howell writes, *"Experience has taught me that isolated treatments are less effective than clusters of treatments. In a manner similar to getting momentum as you roll down a hill, the skull gains movement speed as treatments accumulate day after day. This means that results that cannot be created with isolated treatments and become more predictable with more dense treatment sequences. It is, however, more intense than getting treatments one at a time. Generally, after four days of treatment, a person is ready to rest from the rigors of NCR®. With enthusiastic, NCR®-experienced persons, I will permit more than four days of treatment in a row. My most extreme treatment situation, so far, has been twenty-four treatments in one month"*

He goes on to say that the patient who underwent 24 treatments in one month had excellent results, but a lot more cranial sensitivity ("movement" aka unwinding sensations in the skull/body). At my peak, I did the inflations 20 times per month (20 days). Usually I stick with 10-15 times (days) per month. It only takes a minute or two each day, so it's no big deal in that regard.

Achieving Maximum results

My first NCR doctor told me a story where a guy got dragged into the clinic by his girlfriend. She brought him in because NCR had done so much for her. He was begrudging and angry, "I don't want to do it... it's dangerous and stupid." The guy

was open minded enough to go through with it, but skeptical and angry about everything, even the massage. As soon as the balloon was inflated he screamed "What are you trying to do?! KILL me?!" He stormed out of the clinic and for weeks complained about having headaches and a messed up structure, believing he was permanently damaged by the therapy. My NCR practitioner decided she'd never treat another patient unless they genuinely wanted to be there.

Cranial adjustments are not the sorts of therapies you *push* on anyone. People need to be in the right mindset when it comes to healing at such a fundamental, structural level. The body will not change if it isn't ready to change. These therapies are essentially about undoing, allowing the body to reset to it's ideal, normal position. The body will hold its current unhealthy structure and 'wind back up' after treatment if it isn't given what it needs to unwind. Getting on a good diet, avoiding sugar and wheat, sticking to a regular exercise routine, stretching and yoga are extremely helpful strategies recommended by all practitioners. Some people add "ROLFing" or forms of massage to their self treatment practice. I prefer to keep it simple.

Probably the single most important tip I have found is to do something physically stimulating and relaxing (or exhausting) *prior* to treatments (not immediately after). My favorite thing to do is go to the gym or for a run then come back home and do some stretching, take a shower, then do the inflations.

"Side" Effects/Normal Effects

The most common side effect of all is improved facial symmetry and bone structure. Everything doesn't change at once. Usually one part of the face changes, then another, the another, while everything else is improving only very slightly and usually beyond your visual radar (e.g. back of the head becoming more rounded). A lot of people get confused when one cheekbone widens and stays wider than the other for several weeks. They start to think the treatment is making their face more asymmetrical, but in reality it's a bit difficult to decide how to change the face and bone structure. The body does it automatically. Just let your body do it's thing. If you're concerned feel free to contact me and I can share my experience and other people's experience with you.

The skull is more sensitive and the sutures are more unlocked after treatments for a period of time, so make sure to protect your skull. This is one of the reasons not to treat continuously, and take rests (let things firm up again). Actually, the only negative "side effect" of this therapy I've experienced is cranial sensitivity. Sometimes I wake up in the morning and the side of my head I've been sleeping on feels a bit... compressed, for a few minutes.

Other people get mild flu-like or cold-like symptoms which can persist for up to a week, but these only occur during the first few weeks. Dr. Howell mentions this on his website, and I've talked to at least 5 people now who have experienced it. All of them eventually had great results after they moved through the symptoms. Dr. Howell believes it's a sort of "detoxing" for lack of a better term.

Effects of moving the cranial bones are almost always temporary and only happen during the first several treatments (except cranial sensitivity), especially if the skull has been damaged and distorted for many years. When using a lot of force initially, people can have automatic physiologically strong reactions including trembling and shaking, lasting a couple minutes. According to Dr. Howell, these reactions are due to the nervous system, cerebrospinal fluid and brain finally being released from areas of pressure due to a misaligned, malformed skull. This is really rare during self-treatment since much less force is used. All of the side effects are more rare actually, because self treatment (the way I do it) is more gradual and gentle.

A common side effect is getting tired, or very energized from the therapy the first several treatments. Some people won't sleep as much, and others will need to sleep more than usual.

Less commonly, people may experience pain in areas of the skull where they previously had trauma (i.e. car accident), or even re-experience the trauma as their body begins to release and move through it, or get a mild headache. This should be very temporary.

There may be other side effects not listed here. Go [here](#)

(http://www.drdeanhowell.com/ncr_articles_effects_and_results_of_ncr.html) for a full list of possibilities, effects and side-effects of treatment from someone who has seen hundreds of patients.

Most people experience no side effects and simply feel good afterwards. Especially after they've been doing this for a couple months.

FAQ

Q: How do I know if the finger cot is actually past the turbinate and into the upper throat?

A: The sensation is completely different when inflating in the turbinate versus the upper throat (above & behind the uvula). When the nasal balloon is inflated in the throat (where it's supposed to be) there will often be a sensation of needing to cough. When it's in the turbinate it will feel extremely tight around the balloon. Inflations are done quickly to avoid coughing.

Q: I'm still not sure I'm in the correct place with the balloon. How can I know for certain?

A: There is only one direction the "balloon" can go, and that is to the throat. Try using a larger balloon and inserting it as far through the nose as possible while making extremely light inflations just to keep the latex from scrunching up. If it's as far back as possible and the valve is pushed up against the outside of the nostril, and you're using a large finger cot, then it is definitely where it should be. Just make sure the balloon isn't scrunched up inside the turbinate by making these gentle inflations.

Q: The cranial sensitivity side-effect that you describe - is that permanent?

A: No it only lasts for a week or so, up to maybe 1 to 2 months at the very most. NCR practitioners call it "movement" of tissues and various things as the skull plates gradually (gradually) return to their ideal position. I think it feels more like a sensitivity to pressure and sometimes extremely mild sensations similar to an ache but different. After proceeding with the inflations for 4 days consecutively the sensations get stronger, and it is this 'movement' and these sensations that practitioners try to keep at bay by making people wait 30 days before their next 4-day series.

Because this self-performed method is extremely gentle compared to what the NCR practitioners do, I will sometimes only rest for 2 or 3 days before continuing on another series. As soon as the sensations/"movement" gets too strong to the point where I actually notice it a lot throughout the day and while going to sleep (pressure on the head), I stop and wait for however long it takes until the sensations/movement/sensitivity is mostly gone. For me, that's not more than 2-3 weeks. This is an area where 'body awareness' and intuition comes into play.

Q: If you don't hear a crack or your ears don't pop (what you call success), do you then recommend making another attempt?

A: No, I think it's better to be patient and just proceed by paying attention to the sensations (described in the FAQ answer above). What you should feel for during inflations is an expansion throughout your face, it should start in one part of the face (all the way to the ear) then in the next inflation or two you should feel it in the other side of the face. Once the expansion is throughout both sides, stop inflating. Also pay attention to changes/improvements in your facial structure. There are people who will inflate in the same passage over and over because they're afraid they're not getting fast enough results or the sphenoid isn't moving, I've heard of people doing it 10 or 15 times but I think this just increases the possibility of side effects (sensitivity etc) and harm. Sometimes the sphenoid/structure simply won't and should not move on that day, from that location. The structures will move when they're ready and if you follow the basic guidelines then you should be okay.

Q: Do you know if this or NCR can be combined with orthodontic palate expansion or if it's better to wait until it's done? If the former, should the appliance be removed before each NCR treatment?

A: A lot of people combine it, or combine NCR/self-treatment with face pulling. It will increase the possibility of side effects and harm, but again if you pay attention to your body, to things like sensitivity then it's very unlikely you'll cause any sudden unexpected and unforeseen damage. The question I would ask is - do you trust yourself and your ability to recognize what your body wants and doesn't want? If your body is screaming "I ache here" "I am too sensitive in this area" then can you recognize when to back off? It's everyone's responsibility to pay attention because nobody will monitor you. For people that aren't intuitive or are generally unaware, I discourage doing this yourself.

Q: This freaks me out but I really want to do it. What should I do?

A: It is entirely your decision and I'm not writing this to persuade anyone towards anything. I often hold back on describing how much this has helped me or others because I don't want to come across as persuading people in any way. If you're freaked out or scared by this then you definitely should talk to a practitioner - and a lot of them might refuse to see you until you decide more fully this is what you want to do.

It was scary for me until I did this myself for a week or two, and I had very little idea what I was doing. I think it's natural to be uncertain or hesitant but like I said I'm just sharing my knowledge and information so people have better options. This page would look a lot different if it were a sales page.

Q: How much money do you make from this?

A: Despite a few awesome people being extremely appreciative and generous, little more than minimum wage in a "third world" country for the time I spend emailing people or even Skyping. Most of my time is uncompensated and that's to be expected since the website has minimal traffic. As a result of this + traveling + computer issues I've gotten lazy about updates on the site (FAQ etc) and I apologize for that. Recently I've been making a bit more money from it and have put more work in on the site and my emails.

If you really appreciate this info, you've taken before and after pictures and you see how much you've improved - I am grateful if you can come back and say thanks, or consider some type of compensation since \$25 is really just to cover the time I spend emailing and working with people. There's no obligation to do so and I'd be none the wiser if you just disappeared like most people do, it's just a request of good will. You could also just send me your before/after pictures. At some point I would love to collect all of the testimonials and share them here online. I will always ask your permission first before disclosing any information you send me though.

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